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## UTILITY **PATENT APPLICATION TRANSMITTAL**

	Attorney Docket No.		Vo.		PTC
	First Inventor		Will	iam Kenneth Bowman, Jr.	
	Title	. n.			
	Expres	O O			

(Only for r	new nonprovisiona	al applications under 37	7 C.F.R. 1.5	53(b))	Express Mail I	.abel No.			o d	
APPLICATION ELEMENTS				Assistant Commissioner for Patents Box Patent Application						
See MPEP chapter 600 concerning utility patent application contents.  1. Fee Transmittal Form (e.g., PTO/SB/17) (Submatian onginal and a duplicate for fee processing)				Washington, DC 20231  7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)						
2. Applicant claims small entity status.  See 37 CFR 1.27.  3. Specification [Total Pages 11] [Total Pages 1				8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. ☐ Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. ☐ CD-ROM or CD-R (2 copies); or  ii. ☐ paper  c. ☐ Statements verifying identity of above copies  ACCOMPANYING APPLICATIONS PARTS						
<ul> <li>Background of the Invention</li> <li>Brief Summary of the Invention</li> <li>Brief Description of the Drawings ( if filed)</li> <li>Detailed Description</li> <li>Claim(s)</li> <li>Abstract of the Disclosure</li> </ul>			9.	10. 37 C.F.R.§3.73(b) Statement Power of (when there is an assignee) Attorney						
4. Drawing(s) (35 U.S.C.113) [Total Sheets 1 ] 5. Oath or Declaration [Total Pages ]				12. 🛛 13. 🗀	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations					
<ul> <li>a. Newly executed (original or copy)</li> <li>b. Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed)</li> <li>i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</li> </ul>				14.	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
6. Application Data Sheet. See 37 CFR 1.76					17. 🗆					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) Prior application information: Examiner Group / Art Unit:  For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.										
			17. CO	RRESPO	NDENCE AL	DRESS				
☐ Customer Number or Bar Code Label or ☑ Correspondence address below  (Insert Customer No. or Attach bar code label here)										
Name John Dodds										
Address	1707 N St., NW									
City Washington State		DC		Zip	Code	20036				
Country	USA		Telephone		(202) 463-	(202) 463-3275		Fax	(202) 463-3278	
Name (Print/Type) John Dodds			Registration	Registration No. (Attorney/Agent) 45,533						
Signature XOUL			S			Date February 13, 2002			February 13, 2002	

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Date

(202) 463-3275

February 13, 2002

45,533

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known FEE TRANSMITTAL Application Number for FY 2002 Filing Date William K. Bowman, Jr. First Named Inventor Patent fees are subject to annual revision. **Examiner Name** 🔀 Applicant claims small entity status. See 37 CFR 1.27 Group Art Unit **TOTAL AMOUNT OF PAYMENT** (\$) 370.00 Attorney Docket No. FEE CALCULATION (continued) METHOD OF PAYMENT (check all that apply) Money 3. ADDITIONAL FEES Check Credit card Other None Large Entity Small Entity Deposit Account: Fee Code Fee Fee Paid Deposit Fee Description Code (\$) (\$) Account Number 205 105 130 65 Surcharge - late filing fee or oath Deposit Account 127 50 227 25 Surcharge - late provisional filing fee or Name cover sheet The Commissioner is authorized to: (check all that apply) 139 130 139 130 Non-English specification Credit any overpayments \_\_Charge fee(s) indicated below 147 2.520 147 2.520 For filing a request for ex parte reexamination Charge any additional fee(s) during the pendency of this application Requesting publication of SIR prior to Examiner action 112 920\* 112 9201 Charge fee(s) indicated below, except for the filing fee to the above identified deposit account 113 1,8401 113 1,840\* Requesting publication of SIR after Examiner action **FEE CALCULATION** 115 110 215 55 Extension for reply within first month 1. BASIC FILING FEE 116 400 216 200 Extension for reply within second month Large Entity | Small Entity Fee Description 217 460 117 920 Extension for reply within third month Fee Paid Code (\$) Code (\$) 118 1,440 218 720 Extension for reply within fourth month 101 740 201 370 Utility filing fee 270 128 1.960 228 980 106 330 Extension for reply within fifth month 206 165 Design filing fee 119 320 219 160 Notice of Appeal 107 510 207 255 Plant filing fee 120 320 220 160 108 740 208 370 Reissue filing fee Filing a brief in support of an appeal 121 280 221 140 114 160 214 Provisional filing fee Request for oral hearing 138 1,510 138 1,510 Petition to institute a public use proceeding SUBTOTAL (1) (\$) 370.00 140 240 110 55 Petition to revive - unavoidable 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 141 1,280 241 640 Petition to revive - unintentional Fee from Fee Paid Extra Claims 142 1,280 242 640 Utility issue fee (or reissue) below Total Claims -20\*\* = Χ 143 460 243 230 Design issue fee Independent - 3 Х 620 244 310 Plant issue fee 144 Claims Multiple Dependent 122 130 122 130 Petitions to the Commissioner 123 50 123 50 Processing fee under 37 CFR 1.17(q) Large Entity Small Entity 126 180 126 180 Submission of Information Disclosure Stmt Fee Description Fee Fee Code (\$) Code (\$) Recording each patent assignment per property (times number of properties) 581 40 581 40 103 203 18 9 Claims in excess of 20 Filing a submission after final rejection (37 CFR § 1.129(a)) 102 84 202 42 Independent claims in excess of 3 146 740 246 370 104 280 204 140 Multiple dependent claim, if not paid 740 For each additional invention to be examined (37 CFR § 1.129(b)) 149 249 370 109 84 209 42 \*\* Reissue independent claims over original patent 279 110 18 210 9 \*\* Reissue claims in excess of 20 179 740 370 Request for Continued Examination (RCE) and over original patent 169 900 169 900 Request for expedited examination of a design application (\$) 0 Other fee (specify) SUBTOTAL (2) (\$) SUBTOTAL (3) \*\*or number previously paid, if greater; For Reissues, see above \*Reduced by Basic Filing Fee Paid SUBMITTED BY Complete (if applicable) Registration No.

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T. E. E.

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Name (Print/Type)

Signature

John Dodds

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(Attorney/Agent)

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## INSTRUCTION AUTHORIZATION

Address to: Assistant Commissioner for Patents Washington, D.C. 20231

Application Number	
Filling Date	
First Named Inventorr	William Kenneth Bowman Jr.
Group Art Unit	
Examiner Name	
Attorney Docket Number	

The undersigned hereby authorizes the practitioner(s) named herein to accept and follow instructions from William Kenneth Bowman Jr.								
as to any action to be taken in the United States Patent and Trademark Office regarding the above-identified application without direct contact between the practitioner(s) name herein and the undersigned. In the event of a change in the persons from whom instructions may be taken, the practitioner(s) named herein will be so notified by the undersigned.								
☐ Practitioner(s) at Customer Number  OR  ☐ Practitioner(s) named below:  Place Customer Numb Bar Code Label here								
	Name	Registration Numbe	r					
	John Dodds	45,533						
This is not a Power of Attorney to the above-named practitioner(s). If appropriate, a separate Power of Attorney to the above-name practitioners should be executed and filed in the United States Patent and Trademark Office.								
I am the:								
⊠ Applicant.								
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).								
SIGNATURE of Applicant or Assignee of Record								
Name	William Kenneth Bowman Jr.							
Signature	PP Bill Bourran							
Date	•							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.    Total of forms are submitted.								

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Box Patent Application Commissioner for Patents Washington, DC 20231

February 13, 2002

Dear Sir or Madam:

It is a privilege to submit on behalf of Mr. William Kenneth Bowman, Jr. the enclosed application for a Non Provisional Patent Application regarding a Medicine Organizer Device. I enclose all appropriate documentation, including a generic power of attorney authorizing me to file this patent on his behalf, a return post card and a check for the amount of \$370.00.

I look forward to your confirming receipt of this petition.

Yours truly,

Dr. John Dodds

Patent Attorney (Registration No. 45,533)

Cc: Mi

Mr. William K. Bowman, Jr.

File